UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0076 Expires: May 31, 2002 Estimated average burden

OMB APPROVAL

hours per form

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



FORM D

NOTICE OF SALE OF SECURITIES SEC USE ONLY PURSUANT TO REGULATION D SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMP

				1 11.2-11.4 P. F. C.		
Name of Offering (check if this is an amendment and name has changed, and indicate change.) 2003 Series D Preferred Stock Financing						
Filing Under (Check box(es) that	t apply): Rule 504	☐ Rule 505	⊠ Rule 506	☐ Section 4(6) ☐ ULOE		
Type of Filing: ⊠New Filin	g 🔲 Amendment					
	A. BASIC	<u>C IDENTIFICATION I</u>)ATA			
1. Enter the information request	ted about the issuer					
Name of Issuer (check if t	his is an amendment and name h	nas changed, and indicate	change.)			
Exemplary Software, Inc.						
Address of Executive Offices	(Number and Stre	eet, City, State, Zip Code) Telephone N	lumber (Including Area Code)		
10001 North De Anza Bouleva	ard, Suite 300, Cupertino, CA	95014-2263	(408) 861-9	9613		
Address of Principal Business O	perations (Number and Stre	eet, City, State, Zip Code) Telephone N	Jumber (Including Area Code)		
(if different from Executive Office	es)					
Same as address of Executive Of	fices		Save as ab	ove <u>f. f </u>		
Brief Description of Business						
Software						
				1/10000 0 0 0000		
Type of Business Organization				TOWN S P SHED	San Rei	
	☐ limited partnership, alt	ready formed	□ oth	er (please specify):	, A state of the s	
☐ business trust	☐ limited partnership, to	be formed				
		Month	Year	16 J. O. J. 637		
Actual or Estimated Date of Incorporation or Organization: May 1998 🗵 Actual 🗆 Estimated						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
•	CN for Canada: FN for other fo	reign jurisdiction)		CA		

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

546357.01 1 of 6

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

 Each executive officer 	 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 							
Each general and mana	aging partner of pa	rtnership issuers.						
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner		□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Krishnamurthy, Ravi	if individual)							
Business or Residence Add		d Street, City, State, Zip Code e Anza Boulevard, Suite 30	e) 00, Cupertino, CA 95014-2	263				
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	∑ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Silverman, Arnold	if individual)				0.0			
		d Street, City, State, Zip Code fill Road, Suite 106, Menlo						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Nieh, Peter	if individual)							
		d Street, City, State, Zip Code Hill Road, Suite 106, Menk						
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Zloof, Moshe	if individual)				7			
Business or Residence Address 25425 O'Keefe Lane, Los		d Street, City, State, Zip Code 94022	·)					
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, JT Venture Partners, LLC								
Business or Residence Addr Seven Rosewood Lane,		d Street, City, State, Zip Code e, NJ 07834)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Delbourg-Delphis, Maryle								
		d Street, City, State, Zip Code e Anza Boulevard, Suite 30	e) 0, Cupertino, CA 95014-2	263				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Clearstone Venture Partr	if individual) ners, L.P.							
Business or Residence Addi 2500 Sand Hill Road, Sui		d Street, City, State, Zip Code ark, CA 94025	3)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner			
Full Name (Last name first, Lassila, Erik								
		d Street, City, State, Zip Code 00 Sand Hill Road, Suite 2	e) 05, Menlo Park, CA 94025	<u> </u>				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Check Box(es) that Apply:		Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Thomas A. Shields	if in	idívidual)				
			d Street, City, State, Zip Code) (way, Suite 300, Redwood S	Shores, CA 94065		
Check Box(es) that Apply:		Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Woodside Fund IV L.P.	if in	idividual)				
Business or Residence Addi 350 Marine Parkway, Sui		`	Street, City, State, Zip Code) Shores, CA 94065			
Check Box(es) that Apply:		Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Lightspeed Venture Part						
Business or Residence Adda 2882 Sand Hill Road, Sui		•	Street, City, State, Zip Code) ark, CA 94025			
Check Box(es) that Apply:		Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Meckler, Brian	if in	dividual)				
			Street, City, State, Zip Code) Anza Boulevard, Suite 300	, Cupertino, CA 95014-2	263	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING						
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No				
Answer also in Appendix, Column 2, if filing under ULOE.						
2. What is the minimum investment that will be accepted from any individual?						
2. What is the minimum investment that will be accepted from any individual?						
3. Does the offering permit joint ownership of a single unit?	X					
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.						
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	☐ Al [ID] [MO] [PA] [PR]	1 States				
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
(Check "All States" or check individual States)	☐ AI [ID] [MO] [PA] [PR]	ll States				
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	☐ Al [ID] [MO] [PA] [PR]	ll States				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amoun already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	,	
Type of Security	Aggregate Offering Price	
Debt	-	
Equity		
☐ Common ☑ Preferred		
Convertible Securities (including warrants)	\$	0 \$0
Partnership Interests	\$	0 \$
Other (Specify)	\$	<u>0</u> \$
Total	\$ 7,000,000.00	\$ <u>3,500,000.00</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors		\$ 3,500,000.00
Non-accredited Investors		
Total (for filings under Rule 504 only)	<u></u>	\$
Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504	<u>.</u>	\$
Total		\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$0
Printing and Engraving Costs		\$0
Legal Fees	X	\$46,300.00
Accounting Fees		\$
Engineering Fees		\$
Sales and Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$
Total		\$ 46 300 00

·		R OF INVESTORS, EXPENSES AND	JSE O	F PROCEEI	S		
	b. Enter the difference between the aggregate offetion 1 and total expenses furnished in response to Pathe "adjusted gross proceeds to the issuer."					9	§ <u>6,953,700.00</u>
5.	Indicate below the amount of the adjusted gross proce used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate equal the adjusted gross proceeds to the issuer set for above.	or any purpose is not known, furnish an . The total of the payments listed must					
				Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		□ \$.		_ 🗆	\$	
	Purchase of real estate		□ \$.		_ 🗆	\$.	
	Purchase, rental or leasing and installation of machi	nery and equipment	□ \$.		_ 🗆	\$.	
	Construction or leasing of plant buildings and facility	ties	□ \$.		_ 🗆	\$.	
	Acquisition of other businesses (including the value that may be used in exchange for the assets or see merger)	ecurities of another issuer pursuant to a	□ \$.		- 🗆	\$.	
	Repayment of indebtedness		□ \$.		_ 🗆	\$	
	Working capital		□ \$.		_ 🗵) \$.	6,953,700.00
	Other (specify):		□ \$.		_ 🗆	\$	
			□ \$		_ 🗆	\$.	
	Column Totals		□ \$.	0	_ 🗵	\$	6,953,700.00
	Total Payments Listed (column totals added)			⊠ \$_	6,953	<u>,70</u>	0.00
	D	. FEDERAL SIGNATURE					
foll	sissuer has duly caused this notice to be signed by the owing signature constitutes an undertaking by the issue st of its staff, the information furnished by the issuer to a	er to furnish to the U.S. Securities and Ex	change	Commission	, upon	ıle wr	505, the ritten re-
Issı	er (Print or Type)	Signature		Da	te		
	mplary Software, Inc.	Qui ium			ıy <u>23</u> , 2	200	3
	- '	Title of Signer (Print or Type) Secretary					